Patient Pal, Steve Visit Date and 01/26/200	04.07.014
	1 04:37 PM
Name Time: Account #: PALSTE Visit Created: 01/26/2001 0	4:37 PM
Status Date Medication Dog A Number	*
Using 04/01/2000 Amoxicillin 500 ing 30	
Using 01/01/2000 Zithromax 1 20	
Chief Complaint / Hx Chief Complaint Back pain	***
Location Lower back	
Quality achy; spasmy	
Severity moderate	
Duration 1 month	
Timing constant	
Context occered after ?	
Modifying Factors better with standing	
Associated pain down back of les	
Signs/Symptons  45 yo Meds reviewed.	
Back as in template.	
Dictated HPI:	
Review of Systems	
General-follow up Superior Sup	
General Skin	
Weight Gain/Loss none; zxc ; jjlk Eruptions/Rashes none	
Fatigue none Itching/Jaundice none	
Night Sweats Changes in Pigment/Texture	
Abnormal Nails/Psoriasis	

Head		Ears	
Headache	none	Hearing Defect	
Dizziness	none	Earache	
Head Trauma		Tinnitus	
	F	Discharge from Ear	
Euro		Naca	
Eyes Changes in Vision		<b>Nose</b> Epistaxis	
Inflamation		Discharge	
Diplopia		Chronic Sinusitus	
Lacrimation			J
Mouth Condition of Teeth/Dentures Persistant Sores		Neck Swellings Tenderness	
Sore Throat		Stiffness	
Dysphagia		Thyroid/Goiter	
Hoarseness		,	J
			,
Breasts Masses	-	Respiratory Chronic cough/Asthma	
Tenderness		SOB	none
			none
Discharge		Hemoptysis/Chronic rhinitus	
		Pleurisy	none
		History of pneumonia	
Cardio		· <b>G</b> .I.	
Chest Pain/Angina	none	Change in appetite	
Heart Failure		Nausea	none
Heart Attacks		Vomiting	none
SOB	none	Diarrhea	none
PND	none	Constipation	
DOE	none	Hematemesis	none
Orthopnea	none	Melena	none
Palpitation	none	Change in stools	none
Edema	none	Hemorrhoids	· ·
Murmurs		Hernia	
Varicosities			1

G.U.

Reproductiv

Kidney infections		Gravida / Para / AB	
Stones		LMP	
Bladder infections	none	PMP	
Difficulty/Burning on	none	Menses	
urination Frequency Urination	none	onset/regularity Menopause	
Hematuria		Discharge	
Bladder Discharge	none	Contraception	
		Sexual Function	
		Impotence	1
Musculoskeletal Pain/swelling in joint or muscle		<b>Hematoligic</b> Anemia	
Weakness		Transfusions	
Pain in legs		Bruises	
Sores on feet or limbs Rheumatism		Bleeding disorder	
		Lumps Siekle Cell	none
Gout Phlebitis/Clots		Sickle Cell	
Fractures			
<b>Neurologic</b> Seizures Fainting		<b>Psychiatric</b> Depression	none
Speech difficulty		Allergic/Immunologi	ic
Gait		History of Hives,	
Paralysis		unknown cause	
		unknown cause	
Memory loss/tremor		unknown cause	
Memory loss/tremor  Physical Examina	tion	dimiowii cause	
· 1	ition	Head Description	no deformities
Physical Examina  Constitutional	ition	Head	no deformities
Physical Examina  Constitutional  BP Sitting/Standing		<b>Head</b> Description	A manufacture of the state of t
Physical Examina  Constitutional  BP Sitting/Standing  BP Spine  Pulse Rate/Regularity		Head Description Eyes	no lesions
Physical Examina  Constitutional  BP Sitting/Standing  BP Spine		Head Description Eyes Lids	no lesions no injection
Physical Examina  Constitutional  BP Sitting/Standing  BP Spine  Pulse Rate/Regularity  Respiratory Rate		Head Description Eyes Lids Conjunctivae	no lesions

C AND STREET SAN IN

Development/Nutrition/Boo Habitus	<sup>dy</sup> medium build	Lens	clear
Deformaties/Attention to Grooming	clean	Fundi	disc sharp; vessels nor
Ears		Nose	
External/Canal Rt	no lesions	Mucosa	no lesions
External/Canal Lt	no lesions	Septum/turbinates	no swelling
TM Rt	no inflam	***************************************	)
TM Lt	no inflam		
Hearing ·	normal to whisper	4	
Mouth		Neck	
Lips/teeth/gums	nor, mucosa	Masses/Appearances/Symmetry	sym.; no lesions
Mucosa/Salivary glands/Parotid gland	no swelling	Bruit/JVD	none
Hard/Soft palate	no lesions	Thyroid	nor. size; no nodules
Tongue/Tonsils/Posterior pharynx	no lesions		<i></i>
Thorax		Limbs	
Symmetry/Dimensions	symm.	Cartoid rt/lt	no bruit
Lungs/Tracheal position/crepitus	trach midline; no crep	; 	nor pulse
Palpatation		Radial rt/lt	nor pulse
Percussion	nor. resonance	Femoral rt/lt	nor pulse
Auscultation	clear	Popliteal rt/lt	
		DP rt/lt	nor
	•	PI rt/lt	nor
		Edema`	none
		Varicosotoes/petechiae	minimal
Cardiovascular		Breasts	
Palpation of Heart	no heave thril	Inspection	symm
Auscultation of Heart	RR	Palpatation	no lumps
Abdomen		Genitalia Male Scrotal Contents Exam	
Exam w/notation of any masses/tenderness	no masses; no tenderr		no masses
Exam of liver and spleen	nor size	Cord and Canal	no masses
Examination of the aorta	no swelling	Exam of Penis	no lesions
Examination for	no hernia	Digital rectal exam of	nor texture; no nodule
presence/absence of hernia		prostate	1
Exam of anus/penneum/ rectum/sphincter tone	nor rectal		
rectain/aprimicter tone	,	-	

Presence of hermorhoids / rectal masses	no mass		
Stool for occult blood	neg		
Genitalia Female Extenal genitalia (vulva)/ vagina Uretha / Meatus	no lesions	Lymphatic Nodes Neck Axillae	no swelling
Examination of uretha	no lesions	Groin	noswelling
Examination of bladder	no lesions	Other	no swelling
Cervix	no lesions		
Uterus	nor size	Musculoskeletal	
Rectal	1101 3126	Exam of gait and station	nor gait
Adnexa/Parametria	no swelling; no tender	Inspection/palpatation of digits	noswelling
Anus / perin		Inspection/palpatation of nails	no lesions
Exam of Hand and Neck		Exam of spine, ribs, and pelvis	
Inspection/palpatation	no swelling	Inspection Palpatation	no posture
ROM	nor	ROM w/notation of pain/	age appropriate RON
Stability	no temor	crepitation/contracture Stability w/notation of any dislocation	no dislocation
Muscle Strength and Tone	nor tone	Muscle Strength and Tone	no tone
Exam of Right Upper Extremity		Exam of Left Upper	
Inspection/palpatation	no tenderness	Extremity Inspection/palpatation	no tenderness
ROM	nor ROM	ROM	nor ROM
Stability	no deformity	Stability	no deformity
Muscle Strength and Tone	nor tone	Muscle Strength and Tone	nor tone
Exam of Right Lower Extremity Inspection/palpatation	<u> </u>	Exam of Left Lower Extremity Inspection/palpatation	
ROM	no tenderness	ROM	no tenderness
Stability	nor ROM	Stability	nor ROM
Muscle Strength and Tone	no deformity nor tone	Muscle Strength and Tone	no deformity nor tone
		10110	
Skin Inspection	no lesions		
Palpatation	no lumps		
•	J. O. IOTTIPS		

Neurologic - Cranial Nerves		Cerebellar	
1st: olfactory	nor snell	Finger to Nose	nor
2nd: optic	vision clear	Heel to shin	nor
3rd: occular motor	nor ROM	Rapid alternating movements	nor
4th: trocheal (superior oblique) 5th: trigeminal (sensory/motor)	nor ROM	Romber Reflexes	nor
	nor sensation		symm
6th: abducens (lateral rectus)	nor ROM	Bi C5, 6, 6 rt/lt	nor
7th: facial	nor motor facial	Prto C6, 7, rt/lt	nor
8th: auditory	nor hearing	Tri C7, 8 rt/lt	nor
9th: glossal pharyngeal	nor swllowing	Quad L2-4 rt/lt	nor
10th: vagus		Ach L5-S2 rt/lt	nor
11th: accessory		Plantar rt/lt	nor
12th: hypoglassal		Superficial	
Sensory	symm; nor	Brainstem	
Touch		Jaw	
Pain		Gag	nor
Pressure		Light	
Vibratory		Psychiatric	nor MS
		Discription of pt's judgement and insight	
Mental Status Assessment Orientation of time, place, and person Recent and remote memory	A&O x3		,
memory Mood and affect	nor		
·			

Notes:

<sup>\*\*</sup>Assessment/Plan